OFFICE OF MILITARY GOVERNMENT FOR GERMANY (U.S.)

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PUBLIC HEALTH AND MEDICAL AFFAIRS

(Quarterly Review) ARMY





REPORT OF THE MILITARY GOVERNOR

OCTOBER – DECEMBER 1947 NO. 31

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HIGHLIGHTS

Effective 1 January 1948 the provision of organized Public Health services will become entirely a German responsibility. Military Government will, however, retain the responsibility for obtaining compliance with multipartite and international agreements pertaining to health and narcotic control.

During the last quarter of 1947 over-all health conditions were better than during the same period in 1946. German public health organizations, having full responsibility for public health operations, carried out routine functions with reasonable effectiveness. The high incidence of tuberculosis, the shortage of hospital capacity and of many items of medical equipment and supply were matters of major concern.

The nutritional status of the adult German population, based on average body weights, improved and then stabilized during the three-month period. The change from improvement to deterioration parallels the trend of last year, though the onset is a little later and less pronounced. The incidence of nutritional deficiency signs, other than underweight, remains low.

The incidence of diphtheria, scarlet fever, infectious hepatitis, and respiratory disease clinically diagnosed as influenza increased over the rates for the previous quarter, while all other major communicable diseases decreased. As compared to the same period in 1946, the rates of incidence of all the more important communicable diseases were lower except for pulmonary tuberculosis, poliomyelitis, infectious hepatitis, and respiratory disease clinically diagnosed as influenza. The incidence of gonorrhea was 25 percent and syphilis 4 percent below rates for the October - December period in 1946.

Birth, death and infant mortality data for the U.S.-occupied area for 1947 reveal a decided decrease in the total death rate, from 14.1 per 1,000 population per annum in the last quarter of 1946, to 11.1 for the last quarter of 1947. The annual rate for 1947 for the U.S.-occupied area was 12.1, as compared to an annual rate of 11.7 for Germany as a whole in 1938. The birth rate for the year 1947 was 17.1 as compared to a rate of 19.7 for all of Germany in 1938. Infant mortality rates decreased to 75.9 deaths per 1,000 live births per annum for the last quarter of 1947, compared to 92.2 for the same period in 1946. The annual rate for 1947 was 84.8, as compared to 59.8 for all of Germany in 1938.

For the first time in Germany ample quantities of penicillin, procured with funds provided jointly by the U.S.-U.K. Governments, were available not only for the treatment of all cases of gonorrhea, but also for selected cases of syphilis, in which penicillin is of most value in controlling the spread of the disease, and all other diseases in which it is definitely indicated.

The incidence of communicable animal diseases in the U.S. Zone remained at a low level during the last quarter of 1947. In October a central conference of the German veterinary officials of all four zones of Germany met in Berlin for the first time since the war to discuss uniform measures for control of animal diseases, health inspection on interzonal livestock movements; trade in veterinary instruments, materials and preparations, and the distribution of animal disease statistics in Germany.

GERMAN HEALTH OPERATIONS

Since the early part of 1946 the German health authorities in the U.S.occupied area have been given progressively more and more responsibility for all
Public Health activities. Effective 1 January 1948 the provision of organized Public

Health services will become completely a German responsibility, with Military Government retaining responsibility only for obtaining compliance with multipartite and international agreements pertaining to health and narcotic control. 1/

In the quarterly period covered by this report, October - December 1947, the German authorities made slow progress in furthering the development of a more effective public health service, although notable improvement occurred in December when for the first time all of the Laender Health Departments, except Bremen, had an officially appointed, professionally trained chief. In Hesse the chief of the German health office has encountered considerable opposition to his program for a reorganization of the Land Health Department. In Wuerttemberg-Baden the new chief directed his first efforts toward organizing his office and obtaining recognition by Baden for his apecialist advisors. The new c ief of the Land Health Department in Bavaria, in addition to undertaking a much needed reorganization of the Land health service, has taken special interest in Public Health education and is actively cooperating with the University of Munich in the development of a graduate course in Public Health. The Land health office in Bremen is temporarily headed by a layman, following the resignation of the former professional chief, who had served for more than a year awaiting the appointment of a replacement. The Land government of Bremen has evinced little interest in finding a capable doctor to fill this important position, although recent articles appearing in the German press are bringing the need forcibly to official attention.

The mild winter has reduced hardships incident to inadequate housing, shortage of fuel, and proper protective clothing, thereby minimizing anticipated increased requirements for health services. This undoubtedly accounts, at least in part, for the fact that health conditions in general are better than they were during the same period of 1946, in spite of a continued high incidence of tuberculosis, general under nutrition, and a shortage of hospital capacity and many items of medical equipment and supply.

There continue to be sufficient numbers of active physicians, nurses, and related professional personnel to provide medical care to the population, although not up to desired standards because in many instances there is a shortage of qualified Public Health personnel and tuberculosis specialists. As of I January 1948, there was one physician for every 992 people, as compared to one to 1,078 in January 1947, and one to 1,150 in January 1946. The following tabulation shows the distribution of German medical personnel within the U.S.-occupied area.

^{1/} In consequence of this shift of responsibility, Public Health functional annexes to the report of the Military Governor will be discontinued, effective with this issue.

DISTRIBUTION OF GERMAN MEDICAL PERSONNEL U.S.-OCCUPIED AREA During the Four Quarters of 1947

	TOTAL	BAVARIA	HESSE	WUERTT BADEN	BREMEN	BERLIN (U.S. SECTOR)
PHYSICIANS						
1st Qtr 47	16,000	7,579	2,749	3,729	584	1,359
2d Qtr 47	17,135	8,364	2,962	3,865	606	1,338
3d Qtr 47	18,666	8,908	3,777	3,978	617	1,386
4th Qtr 47	19,264	9,164	3,989	4,055	632	1,424
WURSES			23,-7	4,000	0,2	-,4-4
1st Qtr 47	33,969	13,657	7,316	7,726	1,784	3,486
2d Qtr 47	36,782	15,287	7,472	8,567	1,765	3,691
3d Qtr 47	38,519	16,235	7,939	8,761	1,819	3,765
4th Qtr 47	39,111	16,558	8,046	8,875	1,824	3,808
DENTISTS			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0,012	1,9024	,,,,,,
1st Qtr 47	7,095	3.040	1,350	1,612	260	833
2d Qtr 47	8,180	3,826	1,587	1,670	261	836
3d Qtr 47	8,309	3,756	1,736	1,710	260	847
4th 9tr 47	8,567	3,833	1,848	1,756	264	866
IDWIVES			_,	-,,,,,	204	
1st Qtr 47	4,687	2,049	1,199	1,252	51	136
2d Qtr 47	4,826	2,193	1,207	1,237	25	134
3d Qtr 47	4,933	2,250	1,255	1,236	55 55	137
4th Qtr 47	4,936	2,250	1,258	1,238	54	136
PHARMACISTS			-,-,-	-,	74	-,-
1st Qtr 47	3,246	1,126	564	1,002	108	446
2d Qtr 47	3,100	1,269	575	661	106	489
3d Qtr 47	3,176	1,308	606	666	104	492
4th Qtr 47	3,254	1,343	629	660	107	515
ETERINARIANS					101	/-/
1st Qtr 47	1,218	576	282	280	24	56
2d Qtr 47	1,261	562	334	296	24	45
3d Qtr 47	1,602	691	541	300	24	46
4th Qtr 47	1,649	725	542	311	25	46

Figure 1

PREVENTIVE MEDICINE

Communicable Diseases

Morbidity rates during the last quarter of 1947 indicate improvement in the control of a majority of the communicable diseases in the U.S.-occupied area. Morbidity and mortality rates are shown in detail in statistical tables included with this report (Figures 18, 19, and 20, pages 18, 19, and 20). As compared with the last quarter of 1946, incidence rates for all major communicable diseases were either lower or essentially unchanged, except for tuberculosis, poliomyelitis, infectious hepatitis, and respiratory disease clinically diagnosed as influenza. Rates for the last quarter as compared to the previous three months period, July, August and September 1947, show increases for diphtheria, scarlet fever, infectious hepatitis, and respiratory disease clinically diagnosed as influenza, while all other major communicable diseases either decreased or remained essentially unchanged. The incidence of gonorrhea was 25 percent and syphilis 4 percent below that of the same period in 1946. In the U.S.-occupied area the increased

incidence of poliomyelitis was almost completely in the U.S. Sector of Berlin, with only slight increases in the four Laender. In spite of a decrease in the reported incidence of new cases of tuberculosis in the last quarter of the year as compared to the 3d quarter, the rate was approximately 12 percent above that of the same period in 1946. The control of tuberculosis, while receiving major attention of the German health authorities, cannot as yet be considered to be making effective progress. The many adverse environmental conditions which must await improved economic and social conditions are a serious handicap to control measures. The continued presence of a large pool of open infectious cases for which hospital space is not available facilitates the spread of the disease. A lack of public and government support of control activities, while understandable under existing conditions, also make the task of the German health authorities more difficult. The continued relatively low tuberculosis death rate indicates however that the disease is not out of control as some reports emanating from German sources would imply (Figure 20, page 20). The reported incidence of new cases for each of the four Laender and the U.S. Sector of Berlin, as well as the total number for the U.S.-occupied area for 1946 and 1947 is shown in the following chart.

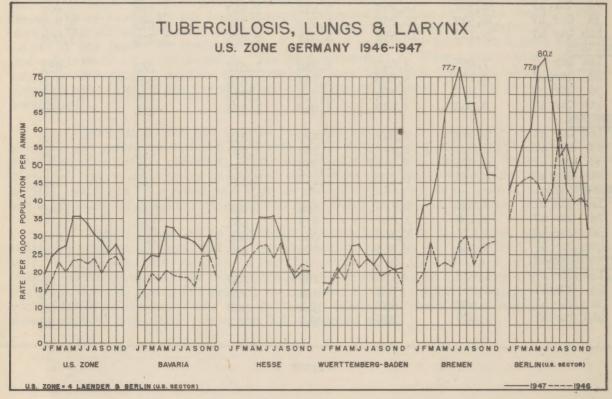


Figure 2

The program to carry out BCG anti-tuberculosis vaccination of children in the U.S. Zone as an adjunct to other control measures made considerable progress during this period. Professional and technical assistance and biological materials are furnished to the German health authorities by the Danish Red Cross under the terms of an agreement concluded between that organization and Military Government, which also provides for the payment by Military Government of limited dollar expenses incurred by the Danish Red Cross in the U.S. Zone. The first actual vaccinations were done in September in the village of Mammalshain (Hesse). During October and November vaccinations were completed in two rural Kreise of Hesse. A total of 15,564 children from 2 to 15 years of age representing 85.6 percent of the reported population of children of this age group were examined, however, 3,203 (20.5 percent) of the children initially examined and tuberculin tested failed to report for final readings. Therefore, only 12,361 children completed tuberculin tests. Of this number, 4,903 (39.6 percent) reacted positively, leaving 7,458

tuberculin negative children, of which 6,284 voluntarily accepted BCG vaccination. From experience gained in these two rural Kreise, it is evident that difficulties will be encountered because of limited transportation facilities in getting children to return for the three visits required to complete the vaccination. During December, tuberculin testing and vaccination were completed in one additional rural Kreis, although statistical data are not yet available. In Hesse, during January 1948, the program will be shifted to the more densely populated Kreise, such as Kassel, Frankfurt, Wiesbaden, and Darmstadt, and it is expected that the program will get under way in Wuerttemberg-Baden and Bavaria early in 1948.

Genorrhea, which reached a peak incidence in the week ending 30 August 1946, declined during the rest of that year with an over-all decline in 1947. In the period October - December 1947 the genorrhea rate was lower than during the same period of 1946, with 46.6 cases per 10,000 per annum, as compared to 61.7, and was also lower than for the period July - September 1947, when it was 55.5. A marked increase in genorrhea in Land Bremen, which began in March 1947, was maintained until September, when it decreased rapidly.

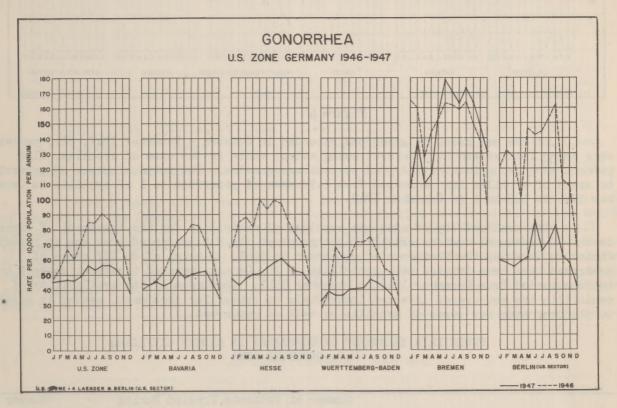


Figure 3

Syphilis has followed a different pattern with a higher rate until the middle of August 1947 than during the same period in 1946. Since then, the rate has been slightly under that of the same period of 1946 with a sharp decrease in the U.S. Sector of Berlin, a slight decrease in Bavaria, approximately the same rates in Wuerttemberg-Baden and Hesse, and a marked increase in Bremen. For the entire U.S.-occupied area in the last quarter of 1947 the rate was 25.3, as compared to 26.9 for the previous quarter, and 26.4 for the October - December period of 1946.

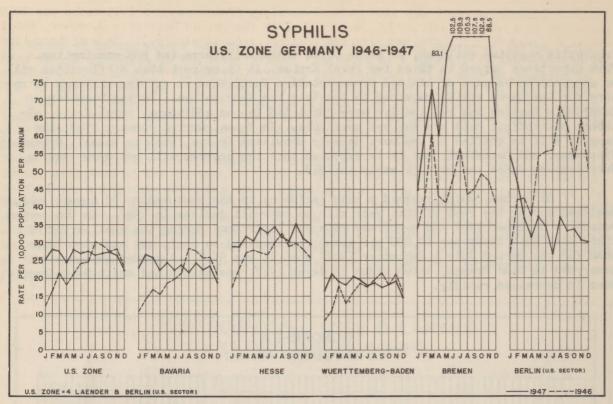


Figure 4

Of the new cases of gonorrhea recorded in October - December 1947, 52.3 percent were among females and 47.7 percent among males, while in the case of syphilis, 61.6 percent were among females and 38.3 percent among males. The ratio of cases of gonorrhea to cases of syphilis has decreased from 1.9 cases of gonorrhea to 1 of syphilis in December 1946 to 1.7 to 1 in December 1947.

The availability of adequate supplies of penicillin for the treatment of gonorrhea in the 90 treatment centers established throughout the U.S.-occupied area was an important factor in lowering the incidence of gonorrhea in 1947. A total of 84,987 cases of gonorrhea have been treated with penicillin in the German operated treatment centers during the period From December 1946 to December 1947. Knowledge of the availability of penicillin has encouraged infected individuals to report for treatment, making it possible to discover many new cases of syphilis as well as gonorrhea.

PENICILLIN TREATMENT OF GONORRHEA IN GERMAN CIVILIANS U.S.-OCCUPIED AREA

							Treated nd Decem		7	Number of Patients
AREA	M	LES			F E	MALE	S	T	OTAL	Treated 1 Dec.1945
	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec	to 1 Jan.48
TOTAL U.S. OCCU- PIED AREA	4,381	3,810	3,425	4,803	4,319	3,846	9,184	7,949	7,271	211,537
BAVARIA	1,967	1,451	1,403	2,004	1,550	1,547	3,971	3,001	2,950	88,243
HESSE	955	986	727	1,055	1,109	968	2,010	2,095	1,695	47,826
WUERTT-BADEN	705	610	554	787	674	494	1,492	1,284	1,048	42,855
BREMEN	170	262	299	340	280	350	510	542	649	11,333
BERLIN (US SECTOR)	584	501	442	617	526	487	1,201	1,207	929	21,280

Figure 5

Diphtheria continued its seasonal increase from a rate of 14.3 cases per 10,000 per annum in the third quarter of 1947 to 20.7 in the period October - December, but it was much lower than for the same quarter in 1946, when it was 29.3. Case distribution was fairly uniform through the Laender. Further progress in the program for immunization of children has undoubtedly contributed to the lower rate in 1947.

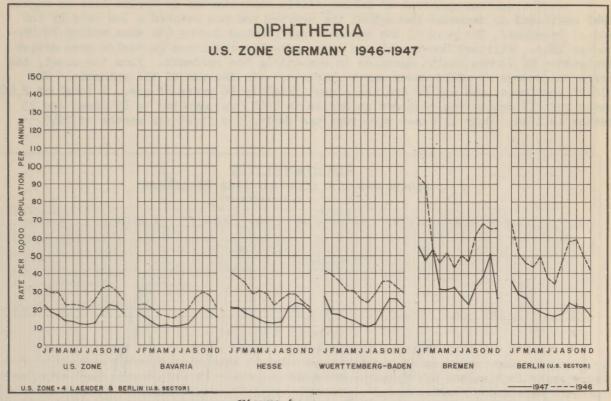


Figure 6

Typhoid fever, after remaining at a low rate of incidence through the first half of 1947 in all the Laender and in the U.S. Sector of Berlin, increased during the third quarter to a rate of 4.0. This increase was largely due to local outbreaks in small villages occurring mainly as a result of inadequate control of water supplies and sewage disposal made worse by the utilization of emergency water supplies because of the severe summer drought. In the fourth quarter of the year the rate declined to 3.0, being slightly under the rate of 3.7 for the same period a year ago. The incidence of paratyphoid fever paralleled that of typhoid fever.

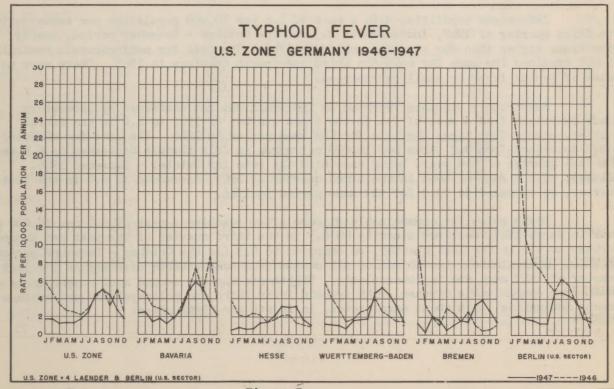


Figure 7

The serious outbreak of poliomyelitis that started in Berlin late in August 1947 continued to decrease throughout the quarter and had reached a low rate by the end of December. The peak of the epidemic was reached during the week ending 20 September 1947. Military Government and Army medical authorities in Berlin gave active assistance to German health agencies in combatting the epidemic. From the onset, the large percentage of adult cases was a characteristic feature of the epidemic. The oldest confirmed case was 62 and the oldest fatality 58 years of age. A total of 2,462 cases and 218 deaths was recorded in Berlin in 1947, as compared to 89 cases and 23 deaths in 1946. Only 11 cases were reported during the first six months of 1947.

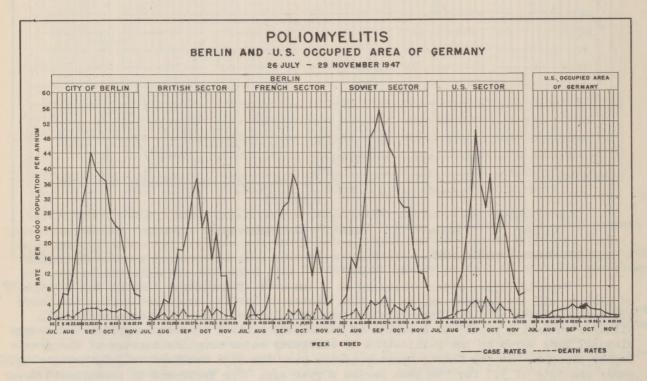


Figure 8

Infectious hepatitis, with a rate of 1.6 per 10,000 population per annum during the third quarter of 1947, increased to 2.3 for the October - December period, nearly five times higher than for the same period in 1946. The rate for meningococcic meningitis of 0.2 remained the same for both the third and fourth quarters in 1947. There were no cases of typhus fever or smallpox reported.

Respiratory diseases reported as influenza but not confirmed by laboratory tests increased from a rate of 2.4 in the third quarter of 1947 to 4.8 in the fourth quarter, nearly four times the rate for the same period in 1946. The rate for whooping cough decreased from 9.2 cases per 10,000 per annum in July through September to 5.5 for the last quarter of the year, being one-third the rate for October - December 1946.

Measles, with a rate of 10.1 in the third quarter of 1947, decreased to 9.7 in the last quarter, as compared to 23.3 for the same period in 1946.

Death rates for communicable disease after reaching a peak of 8.0 per 10,000 per year in March 1947, declined steadily to 6.3 in the third quarter of the year and dropped further to 6.0 in the last quarter, as compared to 6.3 for the October - December period of 1946. Approximately two-thirds of all deaths from communicable diseases in the last quarter of 1947 were due to tuberculosis. Diphtheria was the second most common cause of death from communicable disease, with typhoid fever third and poliomyelitis and meningo-coccus meningitis, with about equal rates, in fourth and fifth place.

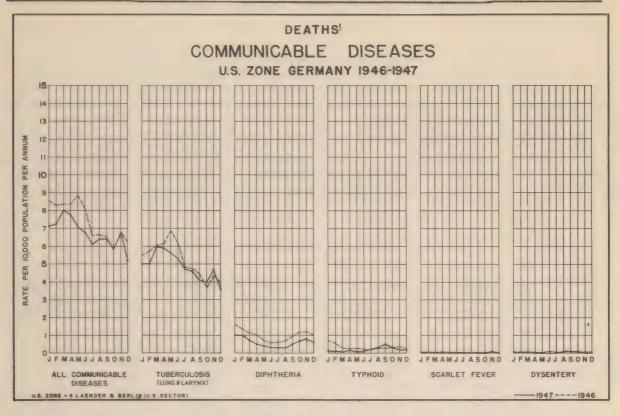


Figure 9

Slow but continued progress in the immunization program, with greatest emphasis on diphtheria, was made during the last quarter of the year. The following tabulation indicates the numbers immunized during October, November, and December 1947 for the U.S.-occupied area, as well as individually by Laender and for the U.S. Sector of Berlin.

VACCINATIONS AND IMMUNIZATIONS

AREA	MONTH			TYPE OF IMMUI	NIZATION		
		Cmallmax	Diptheria	Typhoid	Scarlet Fever	Tambus.	Total 5
		Smallpox	Dihenelia	Тургюта	Level	Typhus	Types
TOTAL US OCCU-	Oct	28,462	64,542	6,666	28,899	111	128,680
PIED AREA	Nov	11,121	75,135	3,586	34,374	7	124,223
	Dec	14,870	41,568	2,461	22,616	-	81,519
	Oct	5,052	38,133	6,209	6,041	1	55,436
BAVARIA	Nov	1,650	40,899	2,795	6,211	1	51,556
	Dec	7,102	16,316	2,388	3,244	-	29,050
	Oct	11,383	3,446	388	6	110	15,33
HESSE	Nov	6,267	6,096	10	60	6	12,43
	Dec	1,034	5,848	41	В	100	6,93
	Oct	12,027	22,893	69	22,852	-	57,84.
WUERTT-BADEN	Nov	3,203	28,108	781	28,103	-	60,19
	Dec	13	19,383	32	19,364	-	38,79
	Oct	-	70	-	-	_	7
BREMEN	Nov	1	32	-	-	-	3.
	Dec	_	21	-	-		2
	Oct	-	-	-	-	_	_
BERLIN	Nov	-	-	-	-	-	(====
(US SECTOR)	Dec	6,721	_	_	_	-	6,72
CUMULATIVE FROM							
BEGINNING OF							
OCCUPATION TO		2 1.06 1.25	0 580 001	2 020 688	3 007 030	0). 800	0 208 00
1 JANUARY 1948		1,496,475	2,589,924	3,929,688	1,097,019	94,899	9,208,00

Figure 10

The annual death rate of 12.1 in 1947 was well below the annual birth rate of 17.1 in the U.S.-occupied area. These rates compare favorably with the annual death rate of 11.7 and the annual birth rate of 19.7 for all of Germany in 1938. The death rate of 15.4 per 1,000 per annum approached the birth rate of 17.8 in the first quarter of 1947, but decreased significantly to 11.1 for the fourth quarter, a rate well below that reached during any quarter of 1946. The birth rate decreased only slightly during the fourth quarter of the year to 16.3. In the U.S. Sector of Berlin, the only area in which the number of deaths has consistently exceeded births, the low birth rate decreased slightly in the fourth quarter. The following tabulation gives birth, death, and infant mortality rates for the past seven calendar quarters for each of the four Laender and the U.S. Sector of Berlin, as well as a total for the entire U.S.-occupied area.

BIRTH, DEATH, AND INFANT MORTALITY RATES

	CAL. YEAR	US OCCUP			WUERTT		U.S. SECTOR
	QUARTER	AREA	BAVARIA	HESSE	BADEN	BREMEN	BERLIN
	2d 46	c/ 17.9	20.7	15.1	17.2	d/	5.8
	3d 46	c/ 17.9 c/ 18.1	20.6	16.0	16.4	<u>d</u> /	9.7
Birth	4th 46	17.0	19.1	15.6	15.8	14.3	10.2
Rate a/	1st 47	17.8	19.8	17.4	15.7	16.3	10.7
	2d 47	17.4	18.8	17.1	16.6	16.7	10.3
	3d 47	17.1	18.2	17.2	16.4	17.1	10.0
	4th 47	16.3	17.6	16.3	15.9	14.4	7.2
	2d 46	c/ 14.9	13.5	14.7	16.2	<u>d</u> /	24.0
	3d 46	c/ 12.7	13.6	10.7	11.9	ď/	16.6
Death	4th 46	14.1	14.8	12.6	12.5	11.7	19.9
Rate a/	1st 47	15.4	15.3	14.5	13.0	15.6	28.5
	2d 47	12.0	11.4	10.7	13.4	10.5	19.4
	3d 47	10.2	10.3	9.4	10.2	8.6	13.4
	4th 47	11.1	11.5	11.1	9.5	9.3	15.0
	2d 46	c/ 101.6	108.7	78.9	97.7	<u>d</u> /	135.4
	3d 46	c/ 92.9	102.8	67.0	95.0		70.9
Infant	4th 46	92.2	103.0	74.9	79.7	90.7	87.4
Mortality	1st 47	98.1	104.8	82.9	91.6	105.1	116.2
Rate b/	2d 47	85.0	88.3	68.1	91.1	72.4	117.8
	3d 47	79.8	90.6	64.2	72.4	38.1	91.8
	4th 47	75.9	82.2	56.9	80.0	54.9	101.5

A/ Birth and death rates expressed as per 1,000 population per annum.

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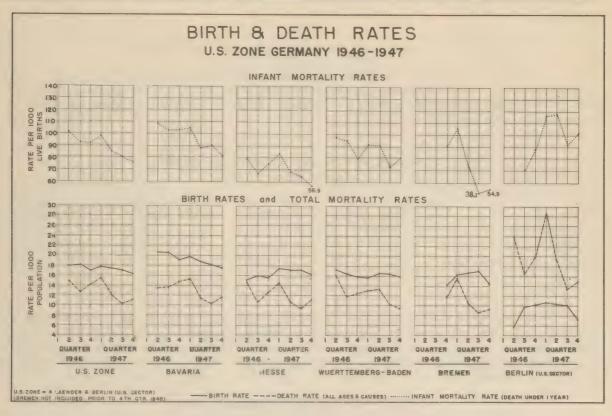
Figure 11

The infant mortality rate of 98.1 per 1,000 live births per annum for the first quarter of 1947 decreased progressively to 75.9 during the fourth quarter, a rate well below that of 92.2 for the fourth quarter of 1946. The decrease was greatest in Land Bremen, but significant in all the other Laender and in Berlin. For the entire year 1947 the rate for the U.S.-occupied area was 84.8, as compared to a rate of 59.8 for all of Germany in 1938.

Infant mortality rates expressed as deaths under one year per 1,000 live births.

c/ Bremen not included.

Data not available.



Nutrition

Figure 12

The nutritional status of the German population is evaluated from month to month from data gathered by German Public Health agencies from the street weighing program and nutrition surveys conducted by German teams, in which a careful study is made of a small cross-section of all age and consumer category groups. Data from the street weighing program indicate gains in average weights for all age groups of adults during September, October, and November, and no significant change in December (Figure 21, page 21). This trend is parallel to that of last year, differing only in magnitude.

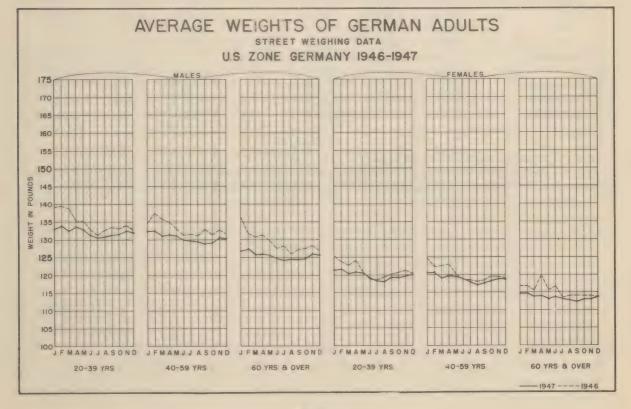


Figure 13

In 1947, the gains in average weight in the latter part of the year, though not balancing the earlier losses, have approached equalization more closely than in 1946. The losses in weight, January - December 1946, and January - December 1947 respectively, are as follows:

LOSSES IN RODY WEIGHTS IN U.S. POUNDS Street Weight Data

Period	Age Gre 20-39		Age Groups of Women 20-39 40-59 Over 60
January - December 1946 January - December 1947	-4.0 -1.0		-4.7 -5.0 -2.5 -1.2 -1.8 -0.9

Figure 14

Weight data from nutrition surveys are obtained from a smaller number of weighings than the data collected in the street weighing program and consequently the average weights are more sensitive to change and fluctuate through a wider range than do those from the street weighing program. Average weights of German adults from data obtained by nutrition survey teams for the year 1947 are shown in the following table.

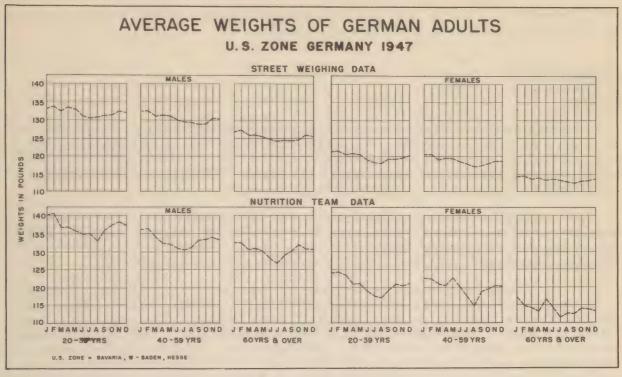
AVERAGE BODY WEIGHTS OF GERMAN ADULTS BAVARIA, HESSE, AND WUERTTEMBERG-BADEN 1947

Nutrition Team Weights in U.S. Pounds

Period	Age	Groups of	Men	Age	roups of	Women
	20-39	40-59	Over 60	20-39	40-59	Over 60
	- \					
Jamuary	140.0	136.2	132.7	124.1	122.5	117.3
February	140.6	136.4	132.6	124.5	122.3	114.9
March	136.8	134.2	130.7	123.6	121.0	114.2
April	136.9	132.5	131.0	121.0	120.5	113.1
May	135.8	132.1	130.2	121.1	122.8	116.8
June	134.8	131.0	128.0	119.1	120.2	114.2
July	135.0	130.6	126.7	117.6	117.6	111.4
August	132.9	131.3	129.1	117.1	114.7	112.7
September	136.0	133.3	130.2	119.5	118.8	112.5
October	137.4	133.4	132.1	121.0	119.6	114.0
November	138.2	134.3	130.9	120.5	120.5	113.9
December	137.4	133.2	130.8	121.1	120.3	113.2

Figure 15

The following chart gives a comparison of the weight data derived from both sources and demonstrates the similarity of trends, especially the cyclic effect.



Figur 16

Clinical signs and symptoms suggestive of states of mutritional deficiency, other than underweight, continue to be reported at low incidence levels by mutrition survey teams. In the last three months there have been some erratic changes in incidence levels but no development of trends.

No data on body weights of school children are available for this period because of a change in reporting procedure. However, data collected by nutrition survey teams indicate that children 0 to 9 and 14 to 18 years of age have essentially normal weights, while those from 10 to 14 are generally underweight, though averaging not so much as 10 percent.

During this three-month period German nutrition survey teams conducted six special surveys to obtain data on selected population groups. Three of these were in industrial plants in Wuerttemberg-Baden, a cement factory, a shoe factory and a ceramics factory. The average weights of the workers surveyed in these plants show that their weights are better than comparable age groups of the general population of Wuerttemberg-Baden surveyed in nutrition surveys. The incidence of signs of nutritional deficiency disease was roughly parallel to that apparent in the general population.

One survey of civilian internees in the Darmstadt Inclosure (Hesse) revealed that the average body weights of internees was the same, or better, than comparable groups of the general population of Hesse, while the percentage of incidence of signs of deficiency diseases was essentially the same. A special survey at the Hersfeld Camp, a German-operated reception center for discharged prisoners of war returned to the U.S. Zone, principally those released by Soviet authorities, of 352 former German prisoners of war who had arrived in the previous 48 hours from Soviet territory, revealed that their nutritional status was about the same of that of a similar group surveyed in August. Average body weights were well below those of comparable age groups of men in Hesse and there was a much higher incidence of signs of nutritional deficiency diseases, particularly nutritional edema, anemia, and Vitamin A deficiency. A survey of 226 former German prisoners of war, who have returned from Soviet control, was conducted in a hospital where they had been under care for an average of two and one-half months since their return. All of these patients had gained weight to the extent that their average weights were above reference standard weights and the incidence of all signs of nutritional deficiency states was lower than among comparable age groups in Hesse, except for anemia and nutritional edema, which showed respectively a 16.8 and

a 47.3 percent of incidence, even after an average of two and one-half months of an adequate diet furnishing ample quantities of protein.

MEDICAL AFFAIRS

Nursing

The number of public health nurses employed by official agencies is now practically the same as before the war. Due to the general increase in venereal disease, tuberculosis, and other conditions causing an increase in the public health case load, additional public health nurses are needed and are available but cannot be placed because additional official positions have not been provided for.

One hundred graduate German nurses from the U.S. Zone are now receiving a sixmonth course of post-graduate training in Switzerland under the auspices of the Swiss Red Cross. Although they are subject to recall by their associations if needed, so far none have been ordered home ahead of the completion of the six-months stay.

A movement has started in Wuerttemberg-Baden and Hesse, without the approval of the leaders of the German nursing profession, to shorten the present two-year course for general nurse training to one and one-half years in order to alleviate an alleged shortage of nurses. Representatives of the various nurse groups feel that the avowed shortage is not general but exists only in certain special groups. They agree that nurses are overworked in many institutions, but feel that with few exceptions this is due to a shortage of funds to pay for additional graduate nurses and domestic helpers. The representatives maintain that present difficulties could better be overcome by increasing the number of students rather than by shortening the present course. Many of the schools of nursing have enough clinical material to train more students than are currently enrolled and they have the applicants, but lack funds, living quarters, and uniforms.

Hospitalization

During 1947 some progress was made in the expansion of hospital bed capacity. The International Refugee Organization, in its program of consolidation of hospital beds for the care of displaced persons, released to German use in December in Wuerttemberg-Baden four hospitals totaling 450 beds, known collectively as the "Vatican Mission Hospitals". New hospital building and major repairs have been held up because of shortages of building materials and labor. In Bavaria a Land Union for Hospital Affairs was founded in order to centralize the management of hospitals. In Land Bremen the Deaconess Hospital began to admit patients after taking over a hospital in Lesum formerly utilized by the U.S. Army. A total of 185,285 hospital beds of all types were available as of 31 December 1947, giving a ratio of 9.9 beds per 1,000 population, as compared to 10.4 beds per 1,000 in December 1946, indicating that the increase in hospital capacity is not keeping pace with the increase in population. The following tabulation shows for the U.S. Zone, and separately for each of the four Laender and the U.S. Sector of Berlin, the total number of all types of German hospital beds and the percentage of occupancy as of the last day of the month indicated.

1/ For a discussion of the increase in population in the U.S.-occupied area from 1939 to 1946, see German Governmental Organization and Civil Administration (Cumulative Review) Report of the Military Governor No. 30, p. 32-33.

STATUS OF CIVILIAN HOSPITAL BEDS (As of Last Day of Month)

AREA	I	BEDS AVAILA	BLE	PERCE	ENT OF BEDS	OCCUPIED
	Oct 1947	Nov 1947	Dec 1947	Oct 1947	Nov 1947	Dec 1947
U.SOCCUPTED AREA	184,968	186,265	185,285	87.3	88.0	79.9
BAVARIA	86,703	86,870	86,052	87.5	88.9	82.4
HESSE	41,215	41,244	41,492	87.5	89.1	79.5
WUERTTBADEN	36,516	37,148	37,242	89.1	88.4	78.1
BREMEN	6,589	6,742	6,656	87.6	86.7	74.2
BERLIN (US SECTOR)	13,945	14,261	13,843	80.4	79.0	72.8

Figure 17

Narcotics Control

A Narcotics Sub-Committee of the Laenderrat Health Committee was organized and began functioning during the period under review. The Sub-Committee is made up of the heads of the four Land Opiumstellen (Opium Offices), with the Chief of the Opium Office of the City of Berlin as consultant. This Sub-Committee is charged with coordinating the work of the Land Opium Offices, keeping zonal records of the production and consumption of narcotic drugs and submitting periodic reports on narcotic traffic as required by the Narcotics Commission of the United Nations and the Permanent Central Opium Board at Geneva. By its terms of reference the Narcotics Sub-Committee is to act as a coordinating opium office for the U.S. Zone.

In general, during October, November, and December, the supply of narcotic drugs for medical purposes in the U.S. Zone was adequate, although shortages of codeine developed in Bavaria and Bremen, due chiefly to difficulties of distribution. The important drug manufacturers have taken steps to meet these shortages by special allocations. Temporary shortages of Dicodid and Dilaudide in Land Bavaria were promptly corrected. A large increase in the use of Dolantine as a substitute for morphine has been noted.

The poppy plant is grown in Germany for the seed. The processing of the dried capsules and straw, a by-product formerly considered waste, now obviate to a considerable extent the need to import crude opium. The total collection of poppy capsules and stems after extraction of the seeds is estimated at something over 1,000 metric tons for 1947. About 3,500 kilograms of morphine can be extracted from this material by special processes.

About 60 percent of reported violations of the German Opium Law in the U.S.eccupied area relate to the forgery of doctors' prescriptions to obtain narcotic
drugs. An increased number of reports of violations indicates more active enforcement
of the German Opium Law which regulates the trade in narcotic drugs.

Medical Supply

Complete responsibility for all action in connection with production, import, and distribution of medical supplies and equipment has been returned to the German health authorities, as German economic officials now have well established channels for obtaining needed items. The importation of raw materials pursuant to the Bizonal Export-Import program has already resulted in indigenous production of some of the more essential health supplies that have been in short supply. Sufficient quantities of finished insulin were imported to supplement indigenous production so as to reach mini-

mum requirements for this essential item.

Imported penicillin was received during this period in ample quantities to treat all cases of gonorrhea, selected cases of syphilis such as in pregnancy, congenital syphilis, and those cases with sensitivity to arsenicals, as well as all other conditions in which its use is definitely indicated. Thus for the first time in Germany there were sufficient quantities of this important therapeutic agent available to the German medical profession throughout the Bizonal area, as a result of a Bizonal agreement to expend appropriated funds from the joint U.S.-U.K. account for this purpose. It has been possible to relax previous Military Government restrictions on the distribution of penicillin by placing full responsibility upon German penicillin commissions in each of the Laender and in the U.S. Sector of Berlin to allocate quantities within their area of jurisdiction on the basis of actual need. The ready availability of penicillin has tended to alleviate the shortage of hospital bed capacity by shortening the period of hospitalization, as well as benefitting the health and morale of the German people.

✓ VETERINARY AFFAIRS

Veterinary Administration and Personnel

The status of official German veterinary personnel improved somewhat during this period. Many of the official positions formerly occupied by temporary appointees were filled with permanent personnel. Short training courses designed especially for preparing applicants for official government positions have been carried out in the U.S. Zone at varying intervals since December 1946, thus providing a pool of trained personnel for these positions. This training program is being continued and will provide additional German personnel to fill existing vacancies.

As result of the U.S. proposal presented at the 18th meeting of the Veterinary Sub-Committee of the Allied Control Authority on 22 May 1947, a meeting of German veterinary officials from all four zones was held in Berlin from 14 to 16 October. This was the first meeting of veterinary officials from all of Germany since the occupation began. Subjects considered at this conference were uniform measures for the control of foot and mouth disease, dourine, bovine tuberculosis, brucellosis, and sterility of large animals; health examinations of animals for interzonal livestock movements; the exchange of animal disease statistics for Germany; and interzonal trade in veterinary supplies. The resulutions adopted at this meeting were approved by the Veterinary Sub-Committee of the Allied Control Authority and are being used as a basis for uniform measures of disease control for all of Germany.

An international conference for the purpose of adopting standards for the preparation of foot and mouth disease vaccine was held in Bern, Switzerland, early in October. The standards approved at this meeting will be used in the preparation of this biological in the U.S. Zone. The U.S. representative from the Bureau of Animal Industry, U.S. Department of Agriculture, came to the U.S. Zone following the meeting and visited the newly constructed foot and mouth disease laboratory of the Behringwerke at Marburg, where he observed the safety methods of laboratory construction adopted for handling the virus of this disease, and the latest technique used in the production of the vaccine.

Food Hygiene

The shortage of fodder, accentuated by last summer's drought, has caused an increase in animal slaughter. The quality of meat resulting from this emergency slaughter has been poor, as German farmers have used this emergency as a means of reducing the number of tuberculous animals within their herds. Of 101,577 tons of meat inspected by German veterinary officials during this quarter, 1.2 percent was rejected as unfit for human consumption of which almost half was due to tuberculosis.

Animal Disease Control

The incidence of animal diseases in the U.S. Zone continued at low levels and in nearly all cases a decrease in incidence was noted in the more important communicable diseases. Figure 22, page 22, gives the incidence and distribution of reportable animal diseases in the U.S. Zone for October, November, and December.

The campaign for the eradication of glanders within the U.S. Zone continued throughout the period with a total of 363,951 tests having been completed since the beginning of the program. From the beginning of the period under review to the end of December a total of 96 infected animals had been discovered and destroyed. Since each of the infected animals acts as a potential focus for the spread of this disease, the success of this eradication program is significant.

The actual incidence of brucellosis in cattle in Germany is not known. During the year 42,670 cows were tested in Bavaria, with 11.5 percent reacting positively to the tests. Hesse reports that brucellosis and trichomonaisis are the two major diseases that cause sterility in the cattle of that Land. During this quarter period, cultures of brucella abortus organism (No. 19 U.S. Department of Agriculture) were flown from the U.S. and made available to the German veterinary laboratories for the production of a vaccine to be used in the protection of cattle.

Fowl pest was reduced in incidence during this quarter by the use of vaccine. The spread of this infection in Bavaria is thought to be due to illegal trade in poultry.

Wuerttemberg-Baden is presently the most active Land in the U.S. Zone in the control of bovine tuberculosis. A project for the testing of all animals for tuberculosis and the destriction of all open cases of the disease is being carried out in several of the Kreise of that Land. Bavaria has recently begun a similar program.

Miscellaneous

The veterinary laboratories in the U.S. Zone continue to expand their service for controlling animal diseases and the examination of food products. Over 15,000 tests of various types pertaining to animal disease control, and about 2,700 examinations of meat and food products were performed each month during the last quarter of 1947.

AFFAIRS HEALTH AND MEDICAL ने ने ने 6.6 632 123 2.1 200 0.0 10.4 522 8 4.8 16.3 8.9 422 971 868 486 989 784 102 का 7.0 0.5 200 0.1 0.0 0.0 0.2 15 18 38 MMA 1 8 Rabies per 8 0.0 0.1 3.0 94.4 0.1 0.0 3 Encephalitis Epidemic 1 0.05 Population न 9.79 12.2 19.8 4.4 3.8 0.3 0.8 49.9 31.9 2.0 1.2 0.6 0.0 0.0 2.0 45.5 212 53,1 1108 9.1 21.3 4.0 3.4 0.2 0.3 35.0 17.5 3.1 1.0 0.3 0.1 0.0 1.4 31.4 1728 Scabies 0 and 3.012.7 0.6 0.1 0.0 2.3 3.8 500 51 역권성 1 Infectious 0.0 Indicates rates between HS per 10,000 8 Undulant Fever 1 0 44 DICE as of 1 October 1947 0.1 Bact. Mood 210 9 7 . CO MAIDNICABLE 21.6 3.5 2.2 0.6 54.4 31.6 2.4 0.3 2.4 Infectious Dysentery 6.7 49.5 14.0 4.4 0.3 2.5 147.6 85.2 2.7 3.9 1.3 8 50 25 5,84 路中の 253 500 158 222 Paratyphoid Expressed 295 116 Typhoid Fever 25.3 1250 Of 169 Syphilis CASES OMCUS, NOVEMBER AND DECEMBER 1947 2082 13.6 3885 DEC) 4.3 5.5 0.2 1.3 46.6 1331 Conorrhea MEZ 8/ 0.1 14-4 188 6.7 26.9 3.4 7.9 0.2 0.5 169 Official population estimate established by Civil Administration Division, 8 - NOV of 64 Meningitia Meningococcus 7521112 Indicates no cases reported. 132 ना ना न 221 Rates for the Quarter (our 5.5 44.6 7.8 549 216 162 150 317 123 111 Reported Tbc Other 8.4 25.7 2669 596 1695 657 629 183 362 Tpc-1618 394 1009 OCTOBER, 34284 Scarlet Fever 20.7 21.5 24.3 19.1 3907 18.2 1642 592 747 39.1 709 148 197 Diphtheria . Plague 8 Case 1 . 1 Cholera 1 3 LOAGA ı 1 0.0 - 0.0 0.0 8 Anthrax 1 xoqlisms Typhus Fever 0.0 8 Indicates no data submitted. 8 Fever Weeks Weeks Weeks) Weeks) Weeks) Weeks Weeks) Weeks) Weeks POPULATION 18,664,300 1,002,300 田 9,230,400 3,743,100 4,184,300 504,200 H Z さ 0 NOV NOA DEC OCT DEC OCT DEC OCT DEC OCT DEC OCT DEC OCT DEC H OCCUPIED AREA OCCUPIED ARE WUBRIT BABBAG-WUERTT EMBERG TOTAL U.S.-TOTAL U.S.-0 BERLIN US SECTOR) US SECTOR N BAVARIA BAVARIA BREMEN BREMEN BERLIN HESSE BADEN 4 BADEN HESSE न न US DECEMBER

COMMUNICABLE DISEASE REFORT (BY LAND)

U. S. OCCUPIED AREA OF GERMANY

Figure 19

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Figure 20

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COMMUNICABLE DISEASE DEATHS (BY LAND)
U. S. OCCUPIED AREA OF GERMANY
OCTOBER, NOVEMBER AND DECEMBER 1947

AVERAGE BODY WEIGHTS OF GERMAN ADULTS
BAVARIA, HESSE, AND WUERTFEMBERG-BADEN g/
(Street Weighing Program, October, November and December 1947)

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Section Sect				L 10-59	60 +	-39 PM	40-59	1 09	20-39	0	09		A 40-59	-	20-39	-59	₹ 09 ₹	F E 20-39	40-59	E 09
Figure From 1.0.5	p t d	(1bs) (1bs)		25.422 129.0 146.0	12,366	29,880 119.3 123.0	27,101 118.1 132.0			4.798	126.0	30,161	26,961				125.7	30,631	27.215 118.7 132.0	12,244
## Weighted (1bs) 130.3 127.3 122.3 17.5 116.1 111.1 131.2 129.6 115.6 111.333 5.666 11.646 134.0 130.3 127.3 122.3 17.5 116.1 111.1 131.2 129.0 123.0 132.0 131.1 131.2 129.0 142.0 142.0 145.0 147.0 123.0 132.0 131.1 131.1 131.2 131.0 142.0 1		(1bs)	-10.5		-22.3		-13.9	-20.0		-15.4	-21.0		-13.3	-19.9		15.7	24.5	2.9	-13.3	19.3
r. Std. Wt. (lbe) - 8.2 -12.8 -16.8 - 4.5 -12.9 -16.5 -10.8 -17.0 -23.4 - 5.0 -15.6 -22.1 -10.9 - 8.2 -12.8 -16.8 - 4.5 -12.9 -16.5 -7.6 -11.6 -15.9 -4.1 -11.8 -16.6 -7.7 - 8.2 -12.8 -16.8 - 16.8 - 16.5 -12.0 -16.5 -7.6 -11.6 -15.9 -4.1 -11.8 -16.6 -7.7 - 8.2 -12.8 -16.9 -12.1 120.1 116.6 132.0 130.7 128.4 120.3 120.3 114.4 131.0 Std. Wt. (lbs) - 10.5 -16.0 -20.1 - 1.9 -11.9 -16.4 -10.0 -15.3 -18.6 - 2.7 -11.7 -18.6 114.0 - 7.4 -11.0 -13.7 - 1.5 - 9.0 -12.3 -7.0 -10.5 -12.7 -2.2 - 8.9 -14.0 -7.7 - 7.4 -11.0 -13.7 -15.5 -9.0 -12.3 134.6 132.9 128.0 132.0 132.0 132.0 132.0 134.5 Std. Wt. (lbs) - 8.053 7.097 3.598 9.271 8.321 3.527 8.405 7.094 3.378 9.952 8.910 3.678 8.054 8.055 8.056 8	BAVARIA Number Weighed Average Weight Ref. Std. Wt.	(1bs) (1bs)		10,848 127.3 146.0	5,665	12,453	116.1	5,913	131.2	10,816 129,0 146,0	5.538	12,675 118.0 123.0	11,333		11,646	128.6	5,425	12,811	11,258	5,397
Trickled (1be) 131.5 130.0 126.9 121.1 120.1 116.6 132.0 130.7 128.4 120.3 120.3 114.4 131.0 142.0 142.0 147.0 123.0 128.9 120.3 114.4 131.0 142.0 142.0 147.0 123.0 132.0 133.0 142.0 142.0 147.0 123.0 132.0 133.0 142.0 142.0 147.0 123.0 132.0 133.0 142.0 142.0 147.0 123.0 132.0 133.0 142.0 142.0 147.0 123.0 132.0 133.0 142.0 142.0 147.0 123.0 132.0 133.0 142.0 142.0 147.0 123.0 132.0 133.0 142.0 142.0 147.0 123.0 132.0 133.0 142.0 142.0 147.0 123.0 132.0 133.0 142.0 142.0 147.0 123.0 132.0 133.0 142.0 142.0 142.0 142.0 142.0 142.0 142.0 142.0 142.0 142.0 142.0 142.0 142.0 142.0 133.0 132.0 133.0 132.0 133.0 142		(1bs) (%)	-11.7	-18.7	-24.7		-15.9	-21.9	-10.8	-17.0	- 0 0		-15.6	-22.1	-10.9	-17.4	23.6	4.4	-15.3	-22.0
10.5 -10.5 -10.0 -20.1 -1.9 -11.9 -10.0 -15.3 -18.6 -2.7 -11.7 -18.6 -11.0 8,053	Number Weighed Average Weight Ref. Std. Wt.	(1bs) (1bs)	7,684 131.5	7.477	3,103		7.348	3.097	6,679	130.7		7.534 120.3	6,718	2,850	6.674	6.671	2,725	7,669	7.124 118.8 132.0	3.370
8,053 7,097 3,598 9,271 8,321 3,527 8,405 7,094 3,378 9,952 8,910 3,678 8,054 135,3 130,6 126,6 120,1 113,1 113,1 134,6 132,9 128,0 121,6 120,5 115,4 134,5 115,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 133,0 142,0 146,0 147,0 123,0 132,0 132,0 132,0 132,0 132,0 132,0 132,0 142,0 146,0 147,0 123,0 132,0		(1bs)	-10.5	-16.0	-20.1		-11.9	-16.4	-10.0	15.3	-18.6		-11.7	-18.6	-11.0	-14.9	-19.2	23	-13.2	-18.6
. (1ba) - 8.7 -15.4 -20.4 - 2.9 -12.9 -19.9 - 7.4 -13.1 -19.0 -1.4 -11.5 -17.6 - 7.5 - 7.5 - 6.1 -10.5 -13.3 - 2.3 - 9.8 -15.0 - 5.2 - 9.0 -12.9 - 1.1 - 8.7 -13.3 - 5.3	Number Weighed, Average Weight Ref. Std. W.	(1bs) (1bs)	133.3	7.097	3.598		8,321	3.527	8,405 134.6 142.0	7,094		9,952	8,910	3,678 115,4 133.0	8.054 134.5 142.0	7.194	3,383	10,151	8,833	3.477
		(1bs) (%)		-15.4		20.0	-12.9	-19.9		- 1			-11.5	-17.6		-13.7	-19.4	- 0.8	-10.9 - 8.3	-17.3

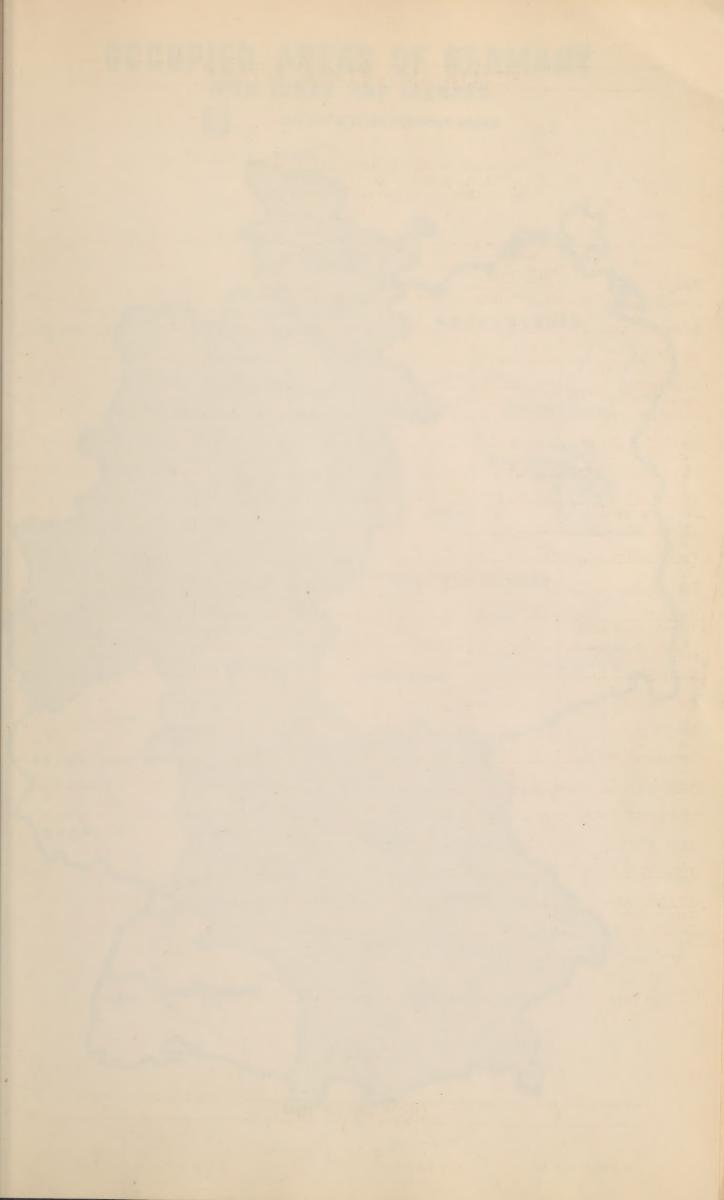
by German personnel. Weights for October 1947 computed on basis of 134,948 adults were obtained Weights for November 1947 " " 132,444 " " Meights for December 1947 " " " 132,937 " " " b/The reference standard weights are not optimum or average or normal weights but are weights which are deemed by consulting nutritionists to be the lower limits of a range which is acceptable for satisfactory health.

INCIDENCE OF REPORTABLE ANIMAL DISEASES U. S. OCCUPIED AREA OF GERMANY FOR OCTOBER, NOVEMBER AND DECEMBER 1947 a/

DISEASE	U. PI	FOTA S. O ED A	L CCU- REA		and aria		F	and lesse		Wuer Bad		-	В	and			erlin S Sect
	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov	Dec	Oct	Nov De
Anthrax	2	1	-	=	1	~	-	_	-	2	-	-	-	_	-	-	-
Blackleg	-	1	ėw.	-	400	~	~	1		-	-	_	-		_	-	-
Coital Vesicular Exant hema	20	32	1	6	-	1	-	30	_	14	2	_	_		-	-	_
Contagious Abortion of bovine	10	3	7	7	3	7	1	Que .	-	2		••	-	-	-	-	-
Dourine of Equine	_	-	-	-	_	-	_	_	-	_		_	-	600	_	-	-
Encephalomyelitis of Equine (& Borna)	3	2	1	-		-	-	_	-	3	2	1	_			_	_
Erysipe las of Swine	670	515	283	375	302	171	210	115	70	85	98	42	_	_	-	-	-
Foot and Mouth Disease	_	_	-	-	_	_	-	_	-	-	940	-	000	-	-	-	-
Forl Cholera	15	1	1	8	_	-	_	1	-	_	_	_	_	_	_	7	_
Fowl Pest	73		18	43		13	18	5	1	12	1	4			_		-
			3				10			146	٦	3					
Glanders Infectious Anemia	-			-			-						-			_	
of Equine	34	22	29	22	10	13	6	4	8	6	8	8	-	-	-	-	-
Malignant Edema of Bovine	-		_	_	_	-	_		-	_	_	_		_	000	_	_
Pox of Ovine	_	-	-	_	-	-	-	_		_	_	_	-	-	-	-	-
Rabies	_	-	_	-	-	-	_	_	do	-	-		_		4-	-	-
Scabies of Bovine-	4		1	1	1	_	_	_	_	3	1	1		0.0	-	_	_
Scabies of Equine	5		17	_	3	9	1	8	5		2	3	2	-	-	2	-
Scabies of Ovine	17	8	19	ç	5	12	5	2	6	3	1	1	-	-	-	_	_
Swine Fever		1	4		1	2			2						_		
	-							-				-	-	_	-	-	
Texas Tick Fever	-		-	-	-	-	-	-	-	-	-	-	-			-	_
Trichomoniasis Tuberculosis of	45	69	42	45	57	28	-	-	-	-	2	14	-	-	- Oran	-	-
Bovine (open)	17	28	23	_	_	-	-	-	-	15	28	23	2	-	-	-	-

a/ All figures are numbers of premises (farms) newly infected during the period.

Figure 22



OCCUPIED AREAS OF GERMANY

WITH ZONES AND LAENDER



12.4

Lithographed by the Adjurant Ceneral